# MAR 1 8 2005 510(k) Summary

K04/311

## As Required by 21 section 807.92 (c)

1-Submitter Name: TIGER MEDICAL PRODUCTS LTD

2-Address:

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3-Phone:

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5-Contact Person:

Mark Engel, President

6-Date summary prepared: April 15th, 2004

7- Official Correspondent: TIGER REGULATORY

8- Address:

1308 Morningside Park Dr. Alpharetta, GA 30022 USA

(770) 777-4146

9- Phone: 10- Fax

(678) 623-3765

11- Contact person:

Jay Mansour

12-Device Trade or Proprietary Name: Tiger Endotracheal tubes (various models and

sizes)

13-Device Common or usual name: Tracheal tubes

Tracheal tubes

14-Device Classification Name:

**15-Substantial Equivalency** is claimed against the following device:

For oral/nasal, cuffed and uncuffed: K892432

For nasal only, cuffed: K931164

For oral only, cuffed: K931163

For nasal only, uncuffed: K931165

For oral only, uncuffed: K931166

#### 11-Description of the Device:

Tiger Medical Products Ltd's Endotracheal tube is available in 90 different variants distributed among 6 main configurations and different sizes, as detailed below. It is marketed as sterile, single use, for airway management.

It consists of a clear tracheal tube with radiopaque blue stripe running its entire length, and it is graduated with multiple centimeter markings to allow easy determination of intubated length, and is terminated with a 15mm standard connector.

It conforms to ISO 5261: 1999 and ASTM F1242: 1996 with one minor exception in the tube marking.

The six categories (or configurations) are listed below:

- (a) CATEGORY 1: uncuffed, oral/nasal: It is provided as uncuffed, murphy, oral/nasal, and in 0.5mm ID increments from sizes 2.0 to 10.0 inclusive, totalling 17 sizes
- (b) CATEGORY 2: uncuffed, nasal only: It is provided as uncuffed, murphy, preformed nasal- 2 eyes, and in 0.5mm ID increments from sizes 2.0 to 10.0 inclusive, totalling 17 sizes

- (c) CATEGORY 3: uncuffed, oral only:
   It is provided as uncuffed, murphy, preformed oral- 2 eyes, and
   in 0.5mm ID increments from sizes 2.0 to 10.0 inclusive, totalling 17 sizes
- (d) CATEGORY 4: cuffed, oral/nasal: It is provided as cuffed, murphy, oral/nasal, and in 0.5mm ID increments from sizes 4.0 to 10.0 inclusive, totalling 13 sizes
- (e) CATEGORY 5: cuffed, nasal only: It is provided as cuffed, murphy, preformed nasal, and in 0.5mm ID increments from sizes 4.0 to 10.0 inclusive, totalling 13 sizes
- (f) CATEGORY 6: cuffed, oral only: It is provided as cuffed, murphy, preformed oral, and in 0.5mm ID increments from sizes 4.0 to 10.0 inclusive, totalling 13 sizes

12-Intended use of the device: (refer to FDA form attached)

The intended use for all the product variants is grouped into three different sections:

- (a) <u>CATEGORY 1 (uncuffed, oral/nasal)</u> and <u>CATEGORY 4 (cuffed, oral /nasal)</u>: The intended use of this device is to be intubated into a patient's trachea via the nose or mouth for airway management.
- (b) <u>CATEGORY 2 (uncuffed, nasal only) and CATEGORY 5 (cuffed, nasal only):</u> The intended use of this device is to be intubated into a patient's trachea via the nose for airway management, specifically for use in surgical procedures involving the head, neck and face.
- (c) <u>CATEGORY 3 (uncuffed, oral only) and CATEGORY 6 (cuffed, oral only):</u> The intended use of this device is to be intubated into a patient's trachea via the mouth for airway management, specifically for use in surgical procedures involving the head, neck and face.

#### 13-Safety and Effectiveness of the device:

This device is safe and effective as the predicate device cited above. This is better expressed in the tabulated comparison (Paragraph 14 below)

### 14-Summary comparing technological characteristics with predicate device:

Please find below a tabulated comparison supporting that this device is substantially equivalent to other medical devices in commercial distribution. Also, Equivalency overview chart path is attached. Indeed, this device is **SUBSTANTIALLY EQUIVALENT** to the predicate device. Refer to the explanations/details within the main submission.

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FDA file reference number:	510k#
Uncuffed, oral/Nasal	K892432
Uncuffed, nasal only	K931165
Uncuffed, oral only	K931166
Cuffed, oral/Nasal	K892432
Cuffed, nasal only	K931164
Cuffed, oral only	K931163
TECHNOLOGICAL	Comparison result
CHARACTERISTICS	
Indications for use	Identical
Target population	Identical
Design	Similar
Materials	Similar
Performance	Similar
Sterility	Similar
Biocompatibility	Similar
Mechanical safety	Similar
Chemical safety	Similar
Anatomical sites	Identical
Human factors	Similar
Energy used and/or delivered	N/A
Compatibility with environment and	N/A
other devices	
Where used	Identical
Standards met	Similar
Electrical safety	N/A
Thermal safety	N/A
Radiation safety	N/A

Refer to the submission for more details concerning dimensional and technological comparisons for all 6 categories, as well as corresponding engineering drawings and samples supplied.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

MAR 1 8 2005

Tiger Medical Products, Limited C/O Mr. Jay Mansour Tiger Regulatory 1308 Morningside Park Drive Alpharetta, Georgia 30022

Re: K041311

Trade/Device Name: Tiger Endotracheal Tubes

Regulation Number: 21 CFR 868.5730

Regulation Name: Tracheal Tube

Regulatory Class: II Product Code: BTR Dated: February 28, 2005 Received: March 4, 2005

#### Dear Mr. Mansour:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies.

You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known):
Device Name: Tiger Endotracheal Tubes
Indications For Use:
The indication for use for all the product variants is grouped into three different sections:
(a) Uncuffed, oral/nasal and Cuffed, oral /nasal: The intended use of this device is to be intubated into a patient's trachea via the nose or mouth for airway management.
(b) Uncuffed, nasal only and Cuffed, nasal only: The intended use of this device is to be intubated into a patient's trachea via the nose for airway management, specifically for use in surgical procedures involving the head, neck and face.
(c) Uncuffed, oral only and Cuffed, oral only: The intended use of this device is to be intubated into a patient's trachea via the mouth for airway management, specifically for use in surgical procedures involving the head, neck and face.
Prescription Use AND/OR Over-The-Counter Use (21 CFR 807 Subpart C)
(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of CDRH, Office of Device Evaluation (ODE)
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